

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Edman</i>	<i>12</i>	<i>08-15-01</i>
O.I.P.E. CLASSIFIER		<i>1079</i>	<i>5/3/01</i>
FORMALITY REVIEW	<i>HJ</i>	<i>1077</i>	<i>2/10/01</i>
RESPONSE FORMALITY REVIEW	<i>SG</i>		<i>11/13/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy

8-58-2058  
11/13/01